

Please type a plus sign (+) inside this box →



Approved for use through 11/30/2005. OMB 0851-0035  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/82 (09-03)

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE  
ADDRESS**

Application Number	10/541,433
Filing Date	16 February 2006
First Named Inventor	Michael GOLDBERG et al.
Group Art Unit	1654
Examiner Name	David Lukton
Attorney Docket Number	P-8859-US

RECEIVED  
CENTRAL FAX CENTER  
JUN 29 2007

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **49443**

☐ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

**49443**

OR

☒ Firm or  
Individual Name **Pearl Cohen Zedek Latzer, LLP**

Address **1500 Broadway**

Address **12th Floor**

City **New York**

State

**NY**

ZIP

**10036**

Country **USA**

Telephone **(646) 878-0800**

Fax

**(646) 878-0801**

I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name **Lewis Bender**

Signature *[Handwritten Signature]*

Date **June 26, 2007**

Telephone **914-347-2220**

Note: Signatures of all the inventors or assignees of record of the entire interest of their representatives(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/96 (6-98)

Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Michael GOLDBERG et al.

Application No./Patent No.: 10/541,433

Filed/Issue Date: February 16, 2006

Entitled: NIGHT TIME ORAL INSULIN THERAPY

Emisphere Technologies, Inc., a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

RECEIVED  
CENTRAL FAX CENTER

JUN 29 2007

States that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel 017548, Frame 0464, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: To:  
The document was recorded in the Patent and Trademark Office at  
Reel Frame, or for which a copy thereof is attached.
2. From: To:  
The document was recorded in the Patent and Trademark Office at  
Reel Frame, or for which a copy thereof is attached.
3. From: To:  
The document was recorded in the Patent and Trademark Office at  
Reel Frame, or for which a copy thereof is attached.

- ☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

**[NOTE:** A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

June 26, 2007

Date

Lewis Bender  
Signature

Lewis Bender

Typed or printed name

Chief Technology Officer

Title

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FERS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.